## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10749939

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			117	47				RATE	FEE		RATE	FEE	
FOR NUMBER F				FILED	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS 47minus 20				us 20=	0= * 27			XS 9=	243-	OR	X\$18=	· · · · · ·	
INDEPENDENT CLAIMS 4 minus 3 :					i =   *			X43=	43-	OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter						olumn 2		TOTAL	671	1	TOTAL	- <del></del>	
CLAIMS AS AMENDED - PART II OTHER THA											THAN		
(Column 1) (Colu						(Column 3)		SMALL	ENTITY	OR	SMALL	NTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**.		=		XS 9=		OR	X\$18=		
MEN	Independent	*	Minus	***		=		X43=		OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				CLAIM		]	+145=		OR	+290=		
								TOTAL		1	TOTAL		
									L	OR	ADDIT. FEE	L	
(Column 1) (Column 2) (Column 3)									1001	ī		1001	
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		XS 9=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u>	4	X43=		OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .							+145=		OR	.+290=		
-								TOTAL		1	TOTAL	•	
	·							ADDIT FEE			OR ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3	<u> </u>						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		XS 9=		OR	X\$18=		
MEN	Independent	* ,	Minus	***		=		X43=		OR	X86=		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT												
+:45=										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
***	The Highest Nu	imber Previously Pa	aiu rui III I II id For" (Total o	r Independ	tentl is the	e highest numb	er fo	ound in the ap	propriate bo	x in c	olumn 1.		